

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000034560

FILED  
Aug 25, 2008  
Secretary of State

Entity Name: LOA OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

12100 SW ACADEMY DRIVE  
LAKE SUZY, FL 34269

**New Principal Place of Business:**

**Current Mailing Address:**

12100 SW ACADEMY DRIVE  
LAKE SUZY, FL 34269

**New Mailing Address:**

FEI Number: 65-0828237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLASTONBURY, SHERI  
12100 SW ACADEMY DRIVE  
LAKE SUZY, FL 34269 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VT ( ) Delete  
Name: SHEPARD, DAVID  
Address: 12408 SW SHERI STREET  
City-St-Zip: LAKE SUZY, FL 34269

Title: PS ( ) Delete  
Name: GLASTONBURY, SHERI  
Address: 12100 SW ACADEMY DRIVE  
City-St-Zip: LAKE SUZY, FL 34269

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VT (X) Change ( ) Addition  
Name: SHEPARD, DAVID  
Address: 12135 SW EGRET CIRCLE  
City-St-Zip: LAKE SUZY, FL 34269

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SHEPARD

VT

08/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date